

CLAIMS ONLY

Application Number

10-686596

Filing Date

7-28-05

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1	1					
2						
3	1					
4						
5	1					
6						
7	1					
8	1					
9	1					
10	1					
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12	1					
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40	1					
41	1					
42	1					
43	1					
44	1					
45	1					
46	1					
47	1					
48	1					
49	1					
50	1					
Total Indep	44					
Total Depend	45					
Total Claims	49					

	Indep.	Depend.	Indep.	Depend	Indep.	Depend
51		1				
52		1				
53		1				
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Total Indep						
Total Depend						
Total Claims						

BEST AVAILABLE COPY